

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR FORM LIMITED OFFERING EXEMPTION

OMB APPROVAL							
OMB Number:	3235-0076						
Expires:	May 31, 2005						
Estimated average burden							
hours per response 1							

SEC USE ONLY					
Prefix		Serial			
DAT	E RECEIV	ED			

Name of Offering (□	check if this is an a	mendment an	d name has cha	anged, and indi	cate change.)			
Interland, Inc.								
Filing Under (Check b	ox(es) that apply):	☐ Rule 504	☐ Rule 505	☑ Rule 506	☐ Section 4(6) ULOI	3	
Type of Filing: ⊠ N	ew Filing 🔲 An	endment			4		:	
		A. BASI	C IDENTIFIC	CATION DAT	ГА			
1. Enter the informatio	n requested about the	ne issuer						-
Name of Issuer (□ chinterland, Inc.	neck if this is an am	endment and r	ame has chang	ged, and indica	te change.)	030	004698	_
Address of Executive C 303 Peachtree Cent		(Number and		State, Zip Code GA 30303	Telephone Nu 404-260-247		ding Area Code)	
Address of Principal B (if different from Exec	-	(Number and Same as		State, Zip Code) Telephone Nu Same as ab		ding Area Code)	
Brief Description of B Provider of web-ho		small- and	medium-size	ed businesse	es		PROCES	SSE
Type of Business Orga							JAN 2 1	2003
oxtimes corporation	□ l	imited partner	ship, already fo	ormed	4 (1		AMIA .	2003
☐ business trust		imited partner	ship, to be forr	ned	other (please	e specify): ed liability co	mpany THOMS	ON
Actual or Estimated Da Jurisdiction of Incorpo	•	on: (Enter two	o-letter U.S. Po	5 8 1	☑ Actual obreviation for S	☐ Estimat	FINANC	IAL

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION.

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 197

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	Promoter	Beneficial Ow	ner		Officer	⊠ Director	General and/or N	Managing
Full Name (Last name first, if individua	l)							
Kocher, Joel								
Business or Residence Address (Number	r and Street, C	City, State, Zip Code)						
303 Peachtree Center Ave., Ste. 56	00 Atlanta,	GA 30303						
Check Box(es) that Apply:	Promoter	Beneficial O	wner	Executive (Officer	_⊠ Director	General and/or N	/lanaging
Full Name (Last name first, if individua Balousek, John B.	D						Tipping.	
Business or Residence Address (Number 303 Peachtree Center Ave., Ste. 50	190						Paris de la Company de la La company de la Company d	
Check Box(es) that Annly: Pro- Full Name (Last name first, if individua Lee, Robert		Reneficial Owner	ΠEx	ecutive Officer	⊠ Direct	or D	General and/or Managin	o Partner
Business or Residence Address (Number	r and Street C	City State Zin Code)						
303 Peachtree Center Ave., Ste. 5								
Check Box(es) that Apply: Pro- Full Name (Last name first, if individua Shapiro, Ed	moter .	Beneficial Owner		ecutive Officer	Direct	or	General and/or Managir	g Partner
Business or Residence Address (Number 303 Peachtree Center Ave., Ste. 5	(100 to 100 to 1			and the second	Pine Julia		ne far i de la companya de la compan	
Check Box(es) that Annly: Pro- Full Name (Last name first, if individual Slezak, Robert T.		Reneficial Owner	□ Ex	ecutive Officer	⊠ Direct	or D	General and/or Manaoir	σ Partner
Business or Residence Address (Number	er and Street, C	City, State, Zip Code)				-		
303 Peachtree Center Ave., Ste. 5	00 Atlanta,	GA 30303						
Check Box(es) that Apply: Pro Full Name (Last name first, if individua Shulman, Allen	TOTAL POLICE AND ADDRESS OF A POLICE AND A P	Beneficial Owner	⊠ Ex	ecutive Officer	Direct	or	General and/or Managir	g Partner
Business or Residence Address (Number 303 Peachtree Center Ave., Ste. 5							Manager Committee of the Committee of th	
Check Box(es) that Apply: Pro	omoter \square	Beneficial Owner	⊠ Ex	ecutive Officer	Direct	tor 🔲	General and/or Managir	ig Partner
Full Name (Last name first, if individua	ıl)		-					
Ferrales, Savino R.								
Business or Residence Address (Number	er and Street, C	City, State, Zip Code)						
303 Peachtree Center Ave., Ste. 5	00 Atlanta,	GA 30303						
Check Box(es) that Apply: Pro Full Name (Last name first, if individual Harper; John M.	Company of the Compan	Beneficial Owner	⊠E	ecutive Officer	☐ Direct	tor <u> </u>	General and/or Managir	ig Partner
Business or Residence Address (Number 303 Peachtree Center Ave., Ste. 5								
Check Box(es) that Apply: P	romoter	Beneficial Own	ner 🗆	Executive Office	cer 🗌 Di	irector 🔲 C	eneral and/or Managing	g Partner
Full Name (Last name first, if individual Par Investment Partners, L.P.	nl)							
Business or Residence Address (Number	er and Street, (City, State, Zip Code)						
One Financial Center, Suite 1600		, Massachusetts 0	2111					

1. Has the	e isquet co	ld or does	the iccue		ORMAT						en e	Yes	No ⊠
1. 11a5 U	C 1330C1 30	ia, oi uocs							•	***************	************	LJ	
Answer also in Appendix, Column 2, if filing under ULOE. 2. What is the minimum investment that will be accepted from any individual?										\$ 0			
2. What is the minimum investment that will be accepted from any individual?										Yes	No		
3. Does the offering permit joint ownership of a single unit?								\boxtimes					
to be li list the	he informa similar rer sted is an a name of th er, you ma	nuneration associated ne broker o	for solicitate person or or or dealer.	ation of pu agent of a if more tha	rchasers in broker or an five (5)	connection dealer response to	on with sale gistered with o be listed	es of secur th the SEC	ities in the C and/or v	offering. I vith a state	f a persor or states) ,	
Full Name (Last name	first, if in	dividual)										
NONE													
Business or	Residence	Address (Number a	nd Street,	City, State	e, Zip Cod	le)						
Name of As	sociated B	roker or D	Dealer										
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[AL]	All States" [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	ID	
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[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR	
Full Name (Last name	first, if in	dividual)	. 									
Business or	Residence	Address (Number a	nd Street,	City, State	e, Zip Coo	le)						
Name of As	sociated B	Broker or D	Dealer					<u> </u>					
States in Wi	hich Perso All States"	n Listed H	as Solicite	ed or Inter	ds to Soli	cit Purcha	sers	**,***					States
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Full Name ((Last name	first, if in	dividual)										
Business or	Residence	Address	(Number a	and Street,	City, Stat	e, Zip Coo	de)						
Name of As	ssociated E	Broker or I	Dealer										
States in W	hich Perso All States"											☐ All	States
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[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[M)]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA	\]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PF	?]

•				
	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE	OF PROCEE	DS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pric	e	Amount Already Sold
	Debt	\$0	_	\$.0
	Equity	\$4,797,000	_	\$ 4,797,000
	☐ Common ☐ Preferred			
	Convertible Securities (including warrants)	\$.3,300,000	_	\$ 3,300,000
	Partnership Interests	\$.0		\$.0
	Other (Specify)	\$.0	_	\$0
	Total	\$ 8,097,000	_	\$ 8,097,000
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			A
		Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	65	_	\$ 8,097,000
	Non-accredited Investors	0		\$ 0
	Total (for filings under Rule 504 only)		_	\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	Time of		Dollar Amount
	Type of offering	Type of Security		Sold
	Rule 505	N/A	_	\$
	Regulation A	N/A	_	\$
	Rule 504	N/A		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees		\boxtimes	\$0
	Printing and Engraving Costs		\boxtimes	\$0
	Legal Fees*		\boxtimes	\$ 645,000
	Accounting Fees*		\boxtimes	\$ 9,500
	Engineering Fees		\boxtimes	\$ 0
	Sales Commissions (specify finders' fees separately)		\boxtimes	<u>\$ 0</u>

Other Expenses (identify) Miscellaneous

^{*}Fees listed included those paid on behalf of merger target.

	C: OFFERING PRICE, NUMBER	OF INVESTORS, EXPENSES AND	USE OF PROCE	EDS	
	b. Enter the difference between the aggregate off tion I and total expenses furnished in response to "adjusted gross proceeds to the issuer."	Part C - Question 4.a. This difference is	the	\$ 7,432,500	
5.	Indicate below the amount of the adjusted gross pused for each of the purposes shown. If the amount estimate and check the box to the left of the estimate the adjusted gross proceeds to the issuer set forth	unt for any purpose is not known, furnish te. The total of the payments listed must ea	n an qual ve Officers,		
			Directors, & Affiliates	Payments To Others	
	Salaries and fees		⊠\$.0	⊠\$.0	
	Purchase of real estate		⊠ \$.0	⊠ \$ 0	
	Purchase, rental or leasing and installation of	of machinery and equipment	⊠\$0	⊠ \$0	
	Construction or leasing of plant buildings ar	nd facilities	⊠\$0	⊠ \$ 0	
	Acquisition of other businesses (including the offering that may be used in exchange for the	ne assets or securities of another			
	issuer pursuant to a merger)		⊠ <u>\$ 0</u>	<u>_</u> \(\s\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	Repayment of indebtedness		⊠ <u>\$ 0</u>	<u> </u>	
	Working capital		⊠ \$ 0	<u>⊠\$0</u>	
	Other (specify):		⊠ <u>\$.0</u>	<u>⊠\$0</u>	
			⊠\$ <u>0</u>	<u>⊠\$0</u>	
	Column Totals		⊠ \$ 0	⊠ \$ 0	
	Total Payments Listed (column totals added	i)	⊠\$_7	⊠ \$ 7,432,500	
	D.	FEDERAL SIGNATURE			
oll	e issuer has duly caused this notice to be signed by the owing signature constitutes an undertaking by the issue set of its staff, the information furnished by the issue	suer to furnish to the U.S. Securities and	Exchange Commis	ssion, upon written re-	
SS	uer (Print or Type)	Signature	Date	;	
nt	erland. Inc.	alla h Skilm	Jan	uary 2. 2002	
		Title of Signer (Print or Type)			
411	en L. Shulman	Chief Financial Officer and General C	Counsel		
				-	